

EXHIBIT 20

1157

APPLICATION **RESIDENCY - PLEASE COMPLETE E** **QUESTION**
(E) **caseholder must submit a separate applica** **J**

APPLICANT INFORMATION

FULL NAME (LAST) Saravia-Cruz (FIRST) Herbert (MIDDLE) D. GENERATION (Jr Sr) -
DOB 12/28/81 SOCIAL SECURITY # 228-914362 SEX Male MARITAL STATUS - (optional)
OCCUPATION Floor Installer GROSS ANNUAL INCOME (from all sources) \$32,005
DRIVER'S LICENSE # T60862568 STATE VA EMAIL - CELL PHONE 703-232-0361

VEHICLES	TYPE	COLOR	MAKE	LICENSE PLATE #	STATE	YEAR
	<u>Econoline Van</u>	<u>White</u>	<u>Ford</u>	<u>XBE8510</u>	<u>VA</u>	<u>2005</u>
	<u>Grand Sport</u>	<u>White</u>	<u>Pontiac</u>	<u>XDJ9942</u>	<u>VA</u>	<u>1998</u>

LIST OTHERS TO RESIDE IN MOBILE HOME AND CHILDREN WHO WILL VISIT ON A PERMANENT BASIS

FULL LEGAL NAME	SOCIAL SECURITY #	RELATIONSHIP	SEX	DATE OF BIRTH	ANNUAL INCOME	OCCUPATION	VISITING ONLY

Note Please provide occupancy history for previous two years**PRESENT ADDRESS:**

STREET 11256 Mobile Dr. APT# -
CITY Fairfax STATE VA ZIP 22030 HOME PHONE # 703-232-0361
RENT OR OWN? rent DATES (from) 12/2010 (to) 1/2012 MONTHLY PAYMENT \$1,400.00
LANDLORD/LENDER (CIRCLE ONE) Ricardo Carcamo CONTACT PHONE # 703-655-2007

PREVIOUS ADDRESS (If at present address less than two years)

STREET - APT# -
CITY - STATE - ZIP - HOME PHONE # -
RENT OR OWN? - DATES (from) - (to) - MONTHLY PAYMENT -
LANDLORD/LENDER (CIRCLE ONE) - CONTACT PHONE # -

PREVIOUS ADDRESS (If at present address less than two years)

STREET - APT# -
CITY - STATE - ZIP - HOME PHONE # -
RENT OR OWN? - DATES (from) - (to) - MONTHLY PAYMENT -
LANDLORD/LENDER (CIRCLE ONE) - CONTACT PHONE # -

EMPLOYER AT TIME OF MOVE-IN

NAME Self-Employed STREET -
CITY - STATE - ZIP - PHONE -
EMPLOYMENT START DATE - POSITION - SALARY -
SUPERVISOR OR HUMAN RESOURCES CONTACT - PHONE -

OTHER INCOME

TYPE OF INCOME	SOURCE	GROSS ANNUAL AMOUNT

RELATIVES/EMERGENCY CONTACT (NOT RESIDING WITH YOU)

(1) NAME Lucy arch D RELATIONSHIP - PHONE # -
STREET - CITY Fairfax STATE VA ZIP 22030
(2) NAME Juan Saravia RELATIONSHIP - PHONE # 703-232-0362
STREET - CITY - STATE - ZIP -

ARE YOU LEGALLY ELIGIBLE TO LIVE IN THE UNITED STATES: (Please check one)

☐ Yes I am a U.S. Citizen
☒ Yes I have valid documentation from the U.S. Immigration and Naturalization Service (INS) that allows me to be in the country
Last source of documentation - List ID# -
If you have an Individual Tax ID # please provide in the following space -

☐ No**ADDITIONAL INFORMATION (Check whichever applies)**

☐ I Do Have a Water Bed ☒ I Do Not Have a Water Bed
☐ I Do Have a Fish Tank ☒ I Do Not Have a Fish Tank

NOTE Renter's insurance is required if you have a water bed or fish tank. Proof of insurance must be provided prior to move in

PET INFORMATION ☒ I Will Not Be Bringing A Pet ☐ I Will Be Bringing A Pet

TYPE - BREED - HEIGHT - WEIGHT -
TYPE - BREED - HEIGHT - WEIGHT -

NOTE Keeping pets requires consent of management, payment of applicable fees/deposits, and execution of Pet Addendum.

Service animals are not considered pets

The Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988 prohibits discrimination in the rental of housing based on race, color, religion, sex, handicap, familial status or national origin. The Federal Agency which administers compliance with this law is the U.S. Department of Housing and Urban Development.

The undersigned applicant and/or co signer represents that all of the above statements are true and correct and hereby authorizes verification of the above information. If such information proves to be false or misleading Owner shall have the right to deny this application. The undersigned applicant and/or co signer hereby consents to allow AJ Dvoskan (Owner) itself or through its designated agents or employees to obtain a consumer report and criminal record and to obtain and verify credit and employment information for the purpose of determining whether to lease an apartment to me. The undersigned applicant or co signer agrees and understands that Owner and its agents and employees may obtain additional consumer reports and criminal record in the future to update or review my account. Upon my request Owner will tell me whether consumer reports or criminal records were requested and the names and addresses of any consumer reporting agency that provided such reports. The undersigned applicant and/or co signer understand that the application fee is non refundable.

APPLICANT [Signature]DATE 11/7/12

Revised 01/13/12



WAPLES00000344